11/24/2015 17 : 44

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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation AMERICA NEXT INC				
	Address (number and street) check if different than previously reported DBOX 320966			
(c)	City, State and ZIP Code	3. FEC Identification Number		
AL	EXANDRIA VA 22320	3. The identification number		
2. Occ	cupation and Name of Employer (for Individual Filers Only)	C C90015439		
2. 000	Appation and Name of Employer (for individual Friers Only)			
	4. TYPE OF REPORT (check appropriate boxes):			
	(a) April 15 Quarterly Report			
	July 15 Quarterly Report 24-Hour Report			
	October 15 Quarterly Report 48-Hour Report			
	January 31 Year-End Report			
	b) Is this Report an amendment? X No Yes, it amends the report filed on	M / D D / Y Y Y Y		
	5. COVERING PERIOD: FROM 07 01 2015			
	THROUGH 09 / 30 / 2015			
	6. TOTAL CONTRIBUTIONS	0.00		
	7. TOTAL INDEPENDENT EXPENDITURES	340536.86		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.				
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE [Elec		DATE ctronically Filed]		
JIM FAIRCLOTH JIM FAIRCLOTH		11/24/2015		
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.				
17012. Gubriliosion of laise, enonedus of incomplete information may subject the person signifig this report to the penalties of 2 0.3.0. 94379.				

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F5N Transaction ID:

This report is complete as filed. America Next had no contributions requiring disclosure during this reporting period.

Form/Schedule: Transaction ID:

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) AMERICA NEXT INC			
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
ONMESSAGE INC.		07 14 2015	
Mailing Address 705 Melvin Ave #105			
		Amount	
City State Anapolic MD	Zip Code 21401	3725.00 Transaction ID : F57.4099	
Purpose of Expenditure Television Ad Placement	Category/ Type	Office Sought: House State: IA Senate	
Name of Federal Candidate Supported or Opposed by Expendit BOBBY JINDAL	ure:	Check One: District: President Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	3725.00	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
ONMESSAGE INC. Mailing Address 705 Melvin Ave #105		07 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
703 WEIVIII AVE #103		Amount	
City State	Zip Code	324795.00	
Anapolic MD	21401	Transaction ID : F57.4102	
Purpose of Expenditure Television Ad Placement	Category/ Type 004	Office Sought: House State: IA Senate	
Name of Federal Candidate Supported or Opposed by Expenditure: BOBBY JINDAL		President District: Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	328520.00	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
ONMESSAGE INC. Mailing Address 705 Mahin Avg #405		07 15 2015	
705 Melvin Ave #105		Amount	
City State	Zip Code	12016.86	
Anapolic MD	21401	Transaction ID: F57.4104	
Purpose of Expenditure Television Ad Production	Category/ Type 004	Office Sought: House State: IA Senate	
Name of Federal Candidate Supported or Opposed by Expendit	ture:	President District:	
BOBBY JINDAL		Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	340536.86	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures		> 340536.86	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)		▶ 340536.86	